



UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE
 United States Patent and Trademark Office
 Address: COMMISSIONER FOR PATENTS
 P.O. Box 1450
 Alexandria, Virginia 22313-1450
 www.uspto.gov

BIB DATA SHEET

CONFIRMATION NO. 4653

| SERIAL NUMBER | FILING or 371(c) DATE | CLASS | GROUP ART UNIT | ATTORNEY DOCKET NO. | | |
|---|---|--|-------------------------|--|---------------------|---------------------------|
| 10/529,792 | 11/10/2005 | 424 | 1643 | LEDER-0014 | | |
| RULE | | | | | | |
| APPLICANTS Giuseppe Pier Pelicci, Opera, ITALY; Saverio Minucci, Opera, ITALY; Daniele Piccini, Locate di Triulzi, ITALY; Marco Maccarana, Seriate, ITALY; Simona Ronzoni, Mariano Comense, ITALY; Beatriz Liliana Areces, Milan, ITALY; Mario Faretta, Corsico, ITALY; | | | | | | |
| ** CONTINUING DATA ***** This application is a 371 of PCT/EP03/10842 09/30/2003 | | | | | | |
| ** FOREIGN APPLICATIONS ***** EUROPEAN PATENT OFFICE (EPO) 02021984.6 09/30/2002 | | | | | | |
| ** IF REQUIRED, FOREIGN FILING LICENSE GRANTED *** SMALL ENTITY ** 08/09/2006 | | | | | | |
| Foreign Priority claimed <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | 35 USC 119(a-d) conditions met <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Met after Allowance | STATE OR COUNTRY | SHEETS DRAWINGS | TOTAL CLAIMS | INDEPENDENT CLAIMS |
| Verified and /LYNN ANNE BRISTOL/ | Examiner's Signature | Initials | ITALY | 12 | 23 | 9 |
| ADDRESS MILLEN, WHITE, ZELANO & BRANIGAN, P.C. 2200 CLARENDON BLVD. SUITE 1400 ARLINGTON, VA 22201 UNITED STATES | | | | | | |
| TITLE Antibody tools for the diagnostic use in the medical therapy with inhibitors of histone deacetylases | | | | | | |
| FILING FEE RECEIVED 1190 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | | | <input type="checkbox"/> All Fees | | |
| | | | | <input type="checkbox"/> 1.16 Fees (Filing) | | |
| | | | | <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) | | |
| | | | | <input type="checkbox"/> 1.18 Fees (Issue) | | |
| | | | | <input type="checkbox"/> Other _____ | | |
| | | | | <input type="checkbox"/> Credit | | |